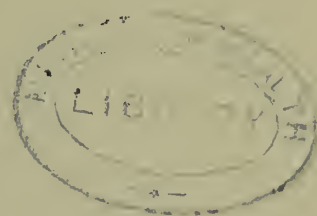


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THE URBAN DISTRICT OF DISS.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH  
TOGETHER WITH THE  
ANNUAL REPORT OF THE SANITARY INSPECTOR  
FOR THE YEAR 1954

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PUBLIC HEALTH COMMITTEE 1954/55

Chairman:- COUNCILLOR L. E. RUSH.

Councillor G. T. Cole.

Councillor H. H. W. Cannell.

Councillor W. H. Cattermole.

Councillor C. Denny.<sup>z</sup>

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Councillor A. H. Taylor.

Councillor J. H. Scoggins.<sup>x</sup>

<sup>x</sup> Chairman of the Council.

<sup>z</sup> Vice-Chairman of the Council.

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## THE URBAN DISTRICT OF DISS

### The Annual Report of the Medical Officer of Health for the Year 1954.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for 1954.

#### I. Introduction

Apart from a measles epidemic in the early part of the year and a moderate amount of winter influenza, the state of health of the community of Diss District maintained a high level.

The population of Diss Urban District remains steady; the estimated population for 1954 is 3,530. The birth rate for this period was a little lower and the death rate a little higher than that of England and Wales for the same period. But it is a remarkable fact that there were no infant deaths; indeed, there were no deaths at all under the age of thirty. And here it should be stated that there were only four infant deaths recorded for the whole of Area 5, while the births were 560, giving a remarkably low infant death rate of 7.1 per 1,000 live births.

A list of the more important enactments of public health interest introduced in 1954 are included in the Report as an indication of present trends and advances in the promotion of public health.

During the year particular interest was focussed on certain advances in the control of communicable diseases; the use of a vaccine for the control of poliomyelitis; the introduction to a limited extent, of B.C.G. vaccination in Norfolk for the better protection of school-leavers against tuberculosis; the addition of tetanus toxoid to the diphtheria-whooping cough prophylactic in general use for the immunisation of infants. The inoculation thus used is known as "triple antigen". Furthermore, the decision to create in Norfolk specified areas (Diss Urban District is now one of these) wherein only heat-treated milk or milk from T.T. herds may be offered for sale, is designed, of course, to reduce the incidence of tuberculosis.

In recent times there is a tendency to a general increase in cases of food poisoning and dysentery. Fortunately, the Diss Urban area had a clean record in this respect in 1954.

The Norwich Mass Radiography Unit of the East Anglian Regional Hospital Board visited Diss in the summer of 1954. Appreciation of the useful work of this Unit was expressed by the Health Committee of your Council.

The County Tuberculosis Clinic at Norwich carried out a special investigation into the health of the children and staff of the Junior School, Diss, in order to detect the presence of any unsuspected tubercular infections. Fortunately, no such cases were detected.

The completion of the main sewage works at Victoria Road in November 1954, and the sewerage of the eastern end of the town was a great advance in local sanitation.

The number of fatal home accidents in England and Wales is increasing year by year. In children between the ages of one and four years a fatal home accident is now the third largest cause of death.

As the years go by problems affecting the social and medical welfare of the aged will require increasing attention. In 1951 there were six-and-three-quarter million people of pensionable age; it is estimated that by 1979 there will be nine-and-a-half million people of pensionable age while the number of persons of working age will remain much the same as in 1951.

## II. Administration

Mr. E. D. Edwards, C.S.I.B., M.S.I.A., R.P., a copy of whose Report for 1954 is appended, continued duty as Sanitary Inspector to your Council throughout the year. Clerical assistance for your Medical Officer of Health was carried out by the Senior Clerk and Staff at the central health office, Norwich.

## III. Legislation

The following enactments concerned with public health matters were introduced or were under consideration in 1954.

### (a) The Housing Repairs and Rents Act 1954

"An Act to make further provision for the clearance and re-development of areas of unfit housing accommodation and for securing or promoting the reconditioning and maintenance of houses; and otherwise to amend the enactments relating to housing, the exercise of certain powers relating to land, and rent control".

### (b) Food and Drugs Amendment Act 1954

This Act provides wider and additional legislation for improved food hygiene as compared with previous Acts. The chief purpose is the better protection of the public against the risk of injury to health through the medium of food. This is particularly necessary as a result of the present day development of communal feeding. The Act received the Royal Assent in November but will not come into force until a date appointed by the Minister of Food.

### (c) Slaughterhouses Act 1954

With the ending of meat rationing in 1954, local authorities became responsible for securing adequate local facilities for slaughtering.



- (d)(i) The Slaughter of Animals (Amendment) Act 1954 and  
(ii) The Slaughter of Animals (Prevention of Cruelty)  
Regulations 1954
- 

This Act deals with the licensing of premises for the slaughter of animals; licensing of slaughtermen; humane conditions, and penalties. The drafting of this new Act had its origin in the need to implement the recommendations of the Committee of Inquiry into the Slaughter of Horses. The detailed Prevention of Cruelty Regulations are an extension of powers under this Act.

- (e) The Milk (Special Designation) (Raw Milk)  
Amendment) Regulations 1954
- 

Under these Regulations south east Norfolk has been included in what is known as a "specified area", i.e. an area in which only specially designated milk - pasteurised, tuberculin-tested, and sterilised - may be sold. The special designation "Accredited" is no longer permitted. Reference to further recent regulations regarding the sale of milk are referred to in a later section of this Report.

#### IV. Vital Statistics

##### (a) Population

The Registrar General estimates the population of Diss Urban District at 3,530 compared with 3,485 in 1953.

- (b) Births. There were 50 live births recorded during the year; 31 males and 19 females. In 1953 there were 47 live births. There was only one still birth and there were no illegitimate births. The birth-rate was, therefore, 14.1 per 1,000 of the resident population compared with 15.2 for England and Wales.

- (c) Deaths numbered 45 (20 male and 25 female) compared with 44 deaths in 1953. The crude death rate was, therefore, 12.7 compared with 12.6 in 1953. The death rate for England and Wales was 11.3.

It is a remarkable fact that there were no deaths of persons under the age of thirty. Moreover, twenty-eight of the total deaths occurred between the ages of seventy and ninety.

- (d) Infant Mortality. It follows from the previous paragraph that the infant mortality rate (i.e. deaths under one year of age per 1,000 live births) for Diss Urban District in 1954 was Nil. For this satisfactory record tribute must be paid to the work of local medical practitioners, nurses, and those volunteers who work unobtrusively in the cause of mothers and infants. Judging by the favourable attendances at the local infant welfare centre the mothers of the district appear to have a well developed sense of maternal responsibility.

(e) The Changing Age Structure of the Population

Considerable interest has been focussed on the change in the age structure of the population of England and Wales at the present time. The fact that the number of old people in the population is steadily increasing has significant social and economic implications. In the introduction to the Report of the Ministry of Health 1953, the Chief Medical Officer comments on this problem. "One of the commonly held fallacies is that as time goes on the proportion of the population in the normal working ages will be materially reduced. While this proportion may in fact become slightly smaller, the main long-term change to be expected is that there will be on the one hand more old people and on the other fewer children in the population. We are in fact approaching the age distribution to be expected in a stationary population with relatively low mortality. The main implications of this change for our health services are already fairly clear. The burden of ill health in old people can be exceedingly heavy but in taking steps to alleviate that burden by appropriate preventive care and rehabilitation we can also ensure that the resources of the health services are not unduly strained.

One factor contributing to the changes in age distribution is the rapid decline in the birth rate since the beginning of the century and its recent tendency to settle at a level just sufficient for each generation to replace itself. The other main factors are the greatly increased expectation of life of the infant at birth, the contemporaneous and accelerated fall in the infant mortality rate and the remarkable decline in mortality among children in later years. Under the conditions ruling in 1838-54, a male infant at birth might have been expected to live rather less than 40 years. By the period 1871-80, his expectation of life had increased to 41.4 years. Between the periods 1881-90 and 1910-12 it again increased to 49.2 years and between 1920 and 1952 to an expectation of more than 67 years of life.

This does not mean, however, that old people are living much longer, and any impression that they are is a further misconception which is not borne out by the statistics. Considering the expectation of life of males again, we find that the expectation of life at 65 years of age was in 1838-54 10.8 years and in 1952 12.0 years. Thus old people are not living appreciably longer. What is happening is that many more of us are now attaining the age of 65 than was the case formerly and it is only in this sense that we are becoming an older population; we are still a very long way from becoming a nation of centenarians".

V. Infectious Diseases (other than tuberculosis)

- (a) Eighty-one cases of infectious diseases were notified by general practitioners during the year and seventy-three of these were cases of measles. Measles was making its usual biennial appearance.
- (b) One case of Scarlet Fever (in the mild form characteristic of present day infections) occurred in a school girl. The usual precautions were taken to prevent the spread of infection.



- (c) There were only three cases of whooping-cough. It is reasonable to expect a reduction in the incidence of this disease in future years as a result of the fairly extensive inoculation of infants with the combined diphtheria-whooping cough antigen which has become increasingly popular.
- (d) The remaining infectious diseases notified were: pneumonia, three: Erysipelas, one.
- (e) Diphtheria cases are no longer anticipated in our local statistics. The disease has not been completely eradicated, however, from England and Wales; but the dramatic fall in cases and deaths year by year continues. In the last ten years notifications have fallen from over 18,500 in 1945 to a new low figure of 182 in 1954 while deaths have declined from 722 in 1945 to 9 in 1954.

In order to obtain eradication of the disease it is considered necessary to secure immunisation of not less than 75% of babies before their first birthday. At the present time less than half this percentage of babies is immunised in England and Wales.

Your Council has no cause for anxiety regarding the immunisation rate amongst children in your District. The immunised baby is now the rule - not the exception; practitioners and nurses and health visitors, are active in immunisation propaganda while mothers fully appreciate the value of the protection offered to their babies. School children not immunised in infancy are offered inoculation by the School Medical Officer as a routine procedure. Ninety per cent of parents of school children agree to primary immunisation or to "booster" doses offered to their children at school. Consequently a sufficiently high proportion of local school children enter adult life with satisfactory immunity. The total births in Area 5 (south-east Norfolk) in 1954 were 560 and during the year 486 children under the age of 5 were immunised. Primary immunisations and "booster" doses for school children, carried out over the period 1953 - 1954, amounted to 3,463. The school population is approximately 5,500.

(f) Poliomyelitis

No cases were notified.

The field trial of poliomyelitis vaccine sponsored by the National Foundation for Infantile Paralysis in America and carried out on a vast scale in 1954 indicates that a vaccine will be found which should prove an effective method of preventing paralytic poliomyelitis. But it is too early to foretell when such a vaccine is likely to be in general use. Several points have to be cleared up: how long will protection last after a course of inoculations? ; at what age should the vaccine be given in order to obtain the best response? What should be the exact timing of the three doses necessary for full immunity? Finally - and most important - comes the "foolproofing" of laboratory production in which the responsibility is great because the working margin of error must be small enough to be insignificant.

(g) Vaccination

The vaccination rate for Area 5 in 1954, was 67% and compares very favourably with the general rate for England and Wales.

## VI. Tuberculosis

Four new cases of Tuberculosis were recorded within the Diss Urban District during the year. Three of these were lung tuberculosis and the fourth an infection of the glands of the neck.

While notified cases in England and Wales show little decrease in recent years nevertheless a substantial decline in mortality from tuberculosis is recorded. Deaths in 1953 were only 40 per cent of what they were in 1948. The more thorough follow-up of contacts and the more extensive use of mass radiography may account, to some extent, for the sustained level of notifications. In 1953 approximately one out of every twelve new cases was detected by examination of contacts and one out of every five by mass radiography.

Of the three new cases of lung tuberculosis recorded in the Diss District two were detected by the Norwich Mass Radiography Unit which visited the Town in July.

The very useful work of this Unit covered, during the visit, a wider field than the Diss Urban District. The following figures extracted from the report of the Medical Director show the final result of the Diss survey:

	<u>Males</u>	<u>Females</u>	<u>Total</u>
No. of Miniature X-ray Examinations.	1,148	1,114	2,262
No. of Cases of Pulmonary T.B. found:-			
(a) Active Cases.	2	3	5
(b) Cases requiring observation at Chest Clinic.	5	3	8
(c) Inactive Post Primary Lesions.	3	-	3
(d) Previously diagnosed cases.	1	-	1

The number of active cases revealed compares favourably with the rate for England and Wales, i.e. five active cases represents 2.2 per 1,000 cases examined compared with a general rate of 3.3 per 1,000 for England and Wales.

Susceptibility to tuberculosis is greatest in the 15-24 age group and, in the same group, females are almost twice as susceptible to the disease as males. It follows, therefore, that any initial effort to reduce the incidence of tuberculosis by vaccination should be introduced at the schoolleaving age. In 1954 the Minister of Health approved the extension of B.C.G. vaccination to children approaching their fourteenth birthday. In the County an offer of vaccination was made to school leavers attending those schools within a ten mile radius of Norwich, i.e. potential city workers. This involved only one school in Area 5, Wymondham Secondary Modern School, where the response by parents and children was very good.

The fact that the children of Diss Church School might have been exposed to a special risk of tubercular infection called for a special survey by the County Tuberculosis Clinic. Fifty children (15%) out of three hundred and forty-nine gave evidence by a positive skin test of having had a tubercular infection (slight or otherwise) at some period in their lives. This is a normal result as is also the fact that one-third of the children in the age group 14-15 were found to be positive reactors.

All the positive reactors (including members of the staff) were X-rayed at the Norwich Chest Clinic; it is satisfactory to record that no unsuspected cases of tuberculosis were detected. The willing co-operation of parents and teachers in an investigation such as this deserves record.



A Health Visitor from the Norwich Chest Clinic investigates the living conditions of all reported cases of tuberculosis. Where necessary arrangements are made for rehousing. All family contacts are X-rayed (unless consent is withheld) and the benefit of vaccination (B.C.G.) is offered to those contacts who stand in need of it.

## VII. Milk

Under the Milk Regulations 1954, only milk with the special designation "pasteurised", "Tuberculin-tested", and "sterilised", may be sold to the public within the Urban District of Diss (and throughout south-east Norfolk). Large areas of England and Wales have already been specified and when completed the scheme will cover at least 68% of the population of England and Wales. Further Regulations to ensure milk safety include the following: The sale of pasteurised milk (and T.T.milk) by can and dipper is illegal; retailers who bought pasteurised milk in bulk containers and bottled it for delivery are now required to purchase from their suppliers pre-packed pasteurised milk in bottles, cans, or churns sealed by the pasteuriser. There are also new regulations regarding the labelling, capping, and sealing of containers.

Only one case of infected milk was reported from the Diss Urban District - a brucella abortus infection (the cause of undulant fever in man). The usual action was taken to ensure that the supply was pasteurised before sale.

## VIII. Housing

Details of work under the Housing Acts are contained in the Report of the Sanitary Inspector which follows this Report.

It is very satisfactory to know that the Housing Survey was completed in 1954. At the time of writing this Report the position is that out of 1352 dwellings 430 require repair, closure, or demolition. Of these 14 require immediate demolition.

There are now 313 inhabited Council houses and it is probably correct to say that one third of the population of Diss Urban District now lives in Council houses - an excellent post-war record.

## IX. Water Supplies

Reference to water supplies is contained in the Report of the Sanitary Inspector which follows this Report. Bacteriological and chemical analyses of the town supply gave satisfactory results throughout the year.

Water is now pumped to a tower at Burston from which 35,000 gallons a day is distributed for the use of Depwade Rural District Council.

## X. Sewage Works

The modern sewage disposal works, officially opened on 30th November 1954, is a highly satisfactory advance in local sanitation and forms a basis for improved and extended sewerage systems within the town.

## XI. Section 47 of the National Assistance Act and the Problem of the Aged.

Under Section 47 of the National Assistance Act powers are given to a Local Authority for the compulsory removal of certain persons to hospital or other suitable premises, on the recommendation of the Medical Officer of Health. Needless to say this is not a duty lightly undertaken and every effort is made to find an alternative solution to the forcible uprooting of the old and infirm from their quiet but insanitary homes and thrusting them unwillingly into the action of institutional life. Fortunately no such cases arose in the Diss District during 1954. Nevertheless action under Section 47 is frequently avoided only by the quiet tactful work of the Welfare Officers who convincingly point out the advantages to be gained from entering a local institution. Here it should be said that very few, once admitted, wish to return to their former living conditions.

The question now arises as to what should be done to prevent a state of affairs in which an elderly person, infirm and incapable, lives under such insanitary conditions that no neighbour or paid Home Help is prepared to give assistance. Some social workers are of opinion that the position is aggravated by the lack of sense of responsibility on the part of children and relatives; that the family responsibility characteristic of previous generations is now moving towards a responsibility which is essentially communal.

A weapon to counteract the effects of this tendency is growing in strength. Fostered by Welfare Officers and Social Workers, Old Peoples Clubs are steadily increasing in popularity. Through the medium of Committee work and with close liaison between Welfare Officer and Health Visitor, potential problem-elderly-persons within the Clubs' working areas can be helped before they reach the final stages of neglect. For this reason alone the initiation of Old Peoples' Clubs organised to keep a kindly eye on all old people within a parish deserves every encouragement.

The welfare of the aged is not merely a social problem it is becoming a medical problem which grows in intensity with the years. More people are living to old age than ever before and while immense advances have been made in saving the lives and keeping the health of the young much less progress has been possible in the prevention of the diseases of old age - brain haemorrhage, cancer, and the failing heart.

For years we have saved the lives of babies to swell the ranks of the chronic sick in old age. The infant mortality rate touches a new low record in each succeeding year: it is natural that we should contrive to find a good ending to a work so well begun.

Our best contribution to the welfare of the elderly is Housing - carefully planned, labour saving, and accident-proof as possible. Add to this kindly supervision, whether by Health Visitor, Warden, or Club Committee. We fuss over infant welfare: the aged need equal attention.

## XII. Accidents in the Home

Accidents in the Home in England and Wales continue to increase year by year. Fatal home accidents in 1949 numbered 4,904; in 1953 the figure was 5,895 (over 16 every day), and incomplete figures available suggest it will be higher again in 1954. The cost to the whole country in hospital treatment alone for home accidents is between 4 million and 5 million pounds a year. From 1940 to 1949 over 60,000 people died from accidents in the home compared with 48,000 in road accidents. In children between the ages of one and four years a fatal home accident is the third largest cause of death.



Old people, too, are particularly liable to accidents; four-fifths of fatal home accidents occur in children under five years of age and in old people of 65 years and over.

The most frequent type of fatal home accidents are as follows:-

Falls	60 per cent
Burns and Scalds	10 per cent
Coal gas poisoning	10 per cent
Suffocation	9 per cent
Poisoning	3 per cent

To assist in the campaign against domestic accidents - so many of which are preventable - the Home Safety Department of the Royal Society for the Prevention of Accidents have urged the setting up of local home safety committees. The Infant Welfare Centre is the most appropriate place for advising mothers regarding safety measures in the home.

### XIII. Health Education

The fundamental factors in environmental sanitation are: potable water; swift and sanitary disposal of excreta; good housing; safe food supplies. Progress in public health may be measured by the degree of sustained effort directed towards these fundamental needs. Without a good standard of environmental sanitation the individual is greatly handicapped in practising the personal hygiene so essential for the control of communicable diseases.

We move continually in company with carriers of dysentery, poliomyelitis, the typhoids, infective jaundice, and the germs of food poisoning of various sorts - not to mention tuberculosis and the common infectious diseases of childhood. For the survival of their species the germs which cause these diseases must pass from one human host to another and one of the obvious and usual ways is via the intestinal tract. We say in a fatalistic way "I picked up a germ somewhere". Nine times out of ten we would be furious if we knew just how we did pick up the germ; the failure of a cook or a waiter to wash his hands before handling our food (and it is well handled); or the friend we contact who failed to wash when he should - clean though he may appear to be.

And so we are back again to the question of Health Education. It has been said that we are fast reaching a stage when the environmental sanitation which can be provided by the community has reached its limit and for the rest - the individual must look after himself. But the problem for the individual is the difficulty of learning where lies real danger to his health; of distinguishing between dirt that doesn't matter very much and dirt (often invisible) that is very dangerous. The same person who throws up his hands in horror at sight of the caterpillar in the cabbage or the maggot in the raspberry (both harmless) will cheerfully eat a fresh duck egg which has been boiled for a few minutes only (potentially highly dangerous). Food cooked in a dirty frying-pan carries little risk while to eat a trifle prepared by a clean hand which bears a clean bandage covering a septic finger might have disastrous consequences.

Better Health is reached by highways marked Statistics and Propaganda. These roads sound hopelessly dull to most people; our task is to put life and interest into them.



#### XIV. Conclusion

In conclusion I wish to thank the Chairman and Members of the Public Health Committee for their continued support and encouragement and for the enthusiastic and efficient help given me by all members of the Sanitary and Clerical staff.

*H. E. Holmes*

# DISS URBAN DISTRICT COUNCIL

Table 1. GENERAL STATISTICS

Area (in acres) (incl. water)	3,628
Estimated Resident Population.	3,530
Rateable Value.	£22,089
Sum represented by a Penny Rate.	£90

Table 2. LIVE BIRTHS

	Males	Females	Total
Legitimate	31	19	50
Illegitimate	-	-	-
Total	31	19	50

Live Birth Rate per 1,000  
of estimated Resident Population

Diss Urban District 14.1

Ø Area 5 13.4

Table 3. STILL BIRTHS

	Males	Females	Total
Legitimate	-	1	1
Illegitimate	-	-	-
Total	-	1	1

Still Birth Rate per 1,000  
total births.

Diss Urban District 19.6

Ø Area 5 26.0

Table 4. DEATHS (all ages)

Male	Female	Total
20	25	45

Crude Death Rate

per 1,000 of estimated Resident Population

Diss Urban District 12.7

Ø Area 5 11.6

Table 5. INFANT MORTALITY (Deaths of Infants under One Year)

	Males	Females	Total
Legitimate	-	-	-
Illegitimate	-	-	-
Total	-	-	-

Infant Mortality per 1,000 Live Births.

Diss Urban District 00.0

Ø Area 5 7.1

## NOTE

Ø Area 5 comprises Depwade & Loddon R.D's and Diss & Wymondham U.D's.

Table 6. CAUSE OF DEATH OF INFANTS UNDER ONE YEAR

Males - Nil

Females - Nil

Table 7. CAUSE OF TOTAL DEATHS (Registrar-General)

	Males	Females	Total
1. Tuberculosis, Respiratory.	-	-	-
2. Tuberculosis, other.	-	-	-
3. Syphilitic disease.	-	-	-
4. Diphtheria.	-	-	-
5. Whooping Cough.	-	-	-
6. Meningococcal infections.	-	-	-
7. Acute poliomyelitis.	-	-	-
8. Measles.	-	-	-
9. Other infective and parasitic diseases.	1	-	1
10. Malignant neoplasm, stomach.	-	-	-
11. Malignant neoplasm, lung, bronchus.	-	-	-
12. Malignant neoplasm, breast.	-	1	1
13. Malignant neoplasm, uterus.	-	1	1
14. Other malignant & Lymphatic neoplasms.	2	4	6
15. Leukemia, Aleukemia.	-	-	-
16. Diabetes.	-	-	-
17. Vascular lesions of nervous system.	1	5	6
18. Coronary disease, angina.	4	1	5
19. Hypertension with heart disease.	-	1	1
20. Other heart diseases.	3	5	8
21. Other circulatory diseases.	2	3	5
22. Influenza.	-	-	-
23. Pneumonia.	2	-	2
24. Bronchitis.	1	-	1
25. Other diseases of respiratory system.	1	-	1
26. Ulcer of stomach and duodenum.	-	-	-
27. Gastritis, enteritis & diarrhoea.	1	-	1
28. Nephritis and nephrosis.	1	-	1
29. Hyperplasia of prostate.	-	-	-
30. Pregnancy, childbirth & abortion.	-	-	-
31. Congenital malformations.	-	-	-
32. Other defined & Ill-defined diseases.	1	2	3
33. Motor vehicle accidents.	-	-	-
34. All other accidents.	-	2	2
35. Suicide.	-	-	-
36. Homicide and operations of war.	-	-	-
Total	20	25	45



Table 8. NOTIFICATIONS OF DEATHS RECEIVED DURING THE YEAR 1954  
(According to Age Groups)

	Males	Females	Total
Under 1 year	-	-	-
1 and under 5	-	-	-
5 " " 10	-	-	-
10 " " 20	-	-	-
20 " " 30	-	-	-
30 " " 40	1	-	1
40 " " 50	1	-	1
50 " " 60	3	3	6
60 " " 70	4	2	6
70 " " 80	5	9	14
80 " " 90	6	8	14
90 " " 100	-	3	3
100 and over	-	-	-
Total	20	25	45

Table 9. SUMMARY OF BIRTH AND DEATH RATE

	1948	1949	1950	1951	1952	1953	1954
<u>Live Births (per 1,000 pop.)</u>	(53)	(35)	(51)	(58)	(62)	(47)	(50)
Diss Urban District.	15.2	10.3	14.0	16.8	17.8	13.4	14.1
Area 5.	15.7	14.5	14.9	15.4	15.6	14.3	13.4
England and Wales	17.9	16.7	15.8	15.5	15.3	15.5	15.2
<u>Still Births (per 1,000 total births)</u>	(1)	(1)	(1)	(Nil)	(2)	(3)	(1)
Diss Urban District.	18.5	28.0	19.2	0.0	31.2	60.0	19.7
Area 5.	30.4	27.0	23.0	26.8	28.0	17.1	26.0
England and Wales.	(Not Published)			)	22.6	22.4	24.0
<u>Crude Deaths (per 1,000 pop.)</u>	(56)	(56)	(50)	(55)	(49)	(44)	(45)
Diss Urban District.	16.3	16.09	13.7	15.9	14.1	12.6	12.7
Area 5.	12.9	13.3	12.1	14.0	12.6	10.9	11.6
England and Wales.	12.8	11.7	11.6	12.5	11.3	11.4	11.3
<u>Infant Mortality (per 1,000 live births)</u>	(3)	(Nil)	(Nil)	(2)	(2)	(2)	(Nil)
Diss Urban District.	56.6	0.0	0.0	34.5	32.2	42.5	0.0
Area 5.	26.8	21.0	14.5	27.5	28.8	34.8	7.1
England and Wales.	34.0	32.0	29.8	29.6	27.0	26.8	25.5

NOTE Figures in brackets are the actual numbers for Diss U.D.

Table 10. NOTIFICATIONS OF INFECTIOUS DISEASES (EXCLUDING TUBERCULOSIS)  
(ACCORDING TO AGE GROUPS) - Diss U.D.

	Under 1	1-2 yrs	3-4 yrs	5-9 yrs	10-14 yrs	15-24 yrs	Over 25	Total
Scarlet Fever.	-	-	-	1	-	-	-	1
Measles.	2	9	16	39	3	1	3	73
Whooping Cough.	-	-	1	2	-	-	-	3
Pneumonia.	-	-	-	-	-	-	3	3
Erysipelas.	-	-	-	-	-	-	1	1
Total	2	9	17	42	3	1	7	81

Table 11. INCIDENCE OF INFECTIOUS DISEASE DURING 1954 (OTHER THAN TUBERCULOSIS) - Diss U.D.

	QUARTERS				Total
	1st	2nd	3rd	4th	
Scarlet Fever.	1	-	-	-	1
Whooping Cough.	-	-	-	3	3
Measles.	69	4	-	-	73
Pneumonia.	3	-	-	-	3
Erysipelas.	-	-	-	1	1
Total	73	4	-	4	81

Table 12. INCIDENCE OF INFECTIOUS DISEASES (EXCLUDING T.B.)  
during last five years - Diss U.D.

	1950	1951	1952	1953	1954
Scarlet Fever.	1	-	1	-	1
Whooping Cough.	11	50	12	4	3
Measles.	71	9	45	1	73
Pneumonia.	4	2	1	-	3
Infective Hepatitis.	1	-	-	-	-
Acute Poliomyelitis (Paralytic).	-	-	-	1	-
Acute Poliomyelitis (Non-Paralytic).	1	-	-	-	-
Food Poisoning.	-	1	-	-	-
Erysipelas.	-	-	1	-	1
Total	89	62	60	6	81

Table 13. TUBERCULOSIS (Details of New Cases during 1954)  
Diss U.D.

Age Period	Pulmonary		Non-Pulmonary	
	M	F	M	F
0-4	-	-	-	-
5-14	-	-	-	1
15-22	-	1	-	-
23-34	1	1	-	-
35-44	-	-	-	-
45-54	-	-	-	-
55-64	-	-	-	-
65 & over	-	-	-	-
Total	1	2	-	1

Table 14. TUBERCULOSIS (NUMBER OF CASES ON T.B.REGISTER AS AT 31.12.54)  
Diss U.D.

	Males	Females	Total
Pulmonary	12	7	19
Non-Pulmonary	2	2	4
Total	14	9	23

Table 15. DETAILS OF NEW CASES OF TUBERCULOSIS FOR LAST FIVE YEARS

Diss U.D.	1950	1951	1952	1953	1954
Pulmonary					
Male	1	2	-	-	1
Female	1	2	-	1	2
Non-Pulmonary					
Male	1	-	-	1	-
Female	2	-	-	-	1
Diss U.D. Total	5	4	-	2	4
Area 5 Total	31	36	43	24	23

Table 16. DIPHTHERIA IMMUNISATION

The following is the number of notifications of primary and booster injections received during the last five years in respect of Area 5.

	Primary Injections		Booster Injections		Total
	Under 5	Age 5-14	Under 5	Age 5-14	
1954	486	171	26	983	1,666
1953	493	392	36	1,855	2,776
1952	371	95	15	598	1,070
1951	460	70	9	178	717
1950	487	100	6	447	1,040

Table 17. VACCINATION AGAINST SMALLPOX

Vaccinations of children (under five years of age) during the years 1951 to 1954 resident in the District and Area 5, are shown in the following Table.

	Diss U.D.				Area 5			
	1951	1952	1953	1954	1951	1952	1953	1954
Number of live births registered.	58	62	47	50	617	623	574	560
Number of vaccinations recorded (0-4 yrs)	42	25	18	29	496	315	391	375
Percentage vaccinated.	72	40	38	58	80	50	68	67



Table 18. DEATH DUE TO CANCER - Diss U.D.

	1947	1948	1949	1950	1951	1952	1953	1954
Number of deaths.	4	13	13	7	5	10	7	8
Percentage of total deaths.	9.6	23.2	20.3	14.0	9.0	20.4	15.9	17.7

Table 19. DEATHS DUE TO CANCER - Area 5

	1947	1948	1949	1950	1951	1952	1953	1954
Number of deaths.	59	83	82	84	86	82	74	87
Percentage of deaths.	11.7	16.9	16.8	17.3	15.3	16.3	16.9	18.5

THE URBAN DISTRICT OF DISS  
ANNUAL REPORT OF THE SANITARY INSPECTOR  
FOR THE YEAR 1954

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SEWERAGE, CONSERVANCY AND DRAINAGE.

The construction and maintenance of the sewers and sewage disposal works is the responsibility of the Council's Surveyor and Engineer.

The new sewage treatment and disposal works was officially opened on the 30th November 1954. These works are of the most modern design and being a great improvement on those previously in use should produce a much purer effluent.

The work for the sewerage of the Eastern part of the Town commenced in March 1954. This work has, in spite of various constructional difficulties, progressed fairly satisfactorily and should be completed during the latter half of 1955. The proportion of existing properties in that area of the Town that will be drained to the new sewer cannot be accurately forecast, but it appears to me that few owners of tenanted dwellings will be likely to have the necessary alterations or conversions carried out. It is considered that at least half of the dwellings in that area will still rely on the existing methods of sewage disposal and that the collection of night soil etc., by this Council will still have to continue for several years to come. There are, of course, various parts of the Town which have no system of main sewerage.

The clearance of night soil, cesspools and privy-vaults has been carried out during the year smoothly and without complaint or nuisance. The contract for this work with Messrs. Tovey Transport Ltd., of Cambridge, expired in December 1954. The contract was renewed for a further period of One year and opportunity was taken at the time to adjust the agreed numbers of cesspools and privy-vaults that would require clearing and that had in the past been charged for by the Contractors.

The conservancy work carried out by the Contractors on behalf of the Council now consists of the following:-

290 pail closets cleared each and every week.

30 privy-vaults and cesspools cleared twice a year,  
(these can be cleared more frequently when requested,  
on payment of the cost of the additional clearance.)

69 visits were made in connection with conservancy and drainage.

The following repairs, improvements etc., were carried out by Owners of properties as the result of informal action only:-

Additional water-closets provided	1.
Drainage systems repaired etc.	7.
Obstructed drains cleared	5.
Pail closets renewed	1.
Water-closets repaired	1.

One septic tank system of drainage was constructed within the district.

## WATER SUPPLIES AND WATER SAMPLES

Main Supply. This, the responsibility of the Council's Water Engineer, continued to give a result of 'Highly Satisfactory' during the year.

Other Supplies. There was 1 complaint of an unsatisfactory well water supply but when sampled this water gave a bacteriological result classed as 'Highly Satisfactory'. It was evident that the unsatisfactory nature of the water was due to the high degree of hardness. The complainant, being owner/occupier of the premises concerned, was recommended to install a small water softening plant.

2 routine samples of well water were also taken and each gave a report of 'Highly Satisfactory'.

3 water samples were taken from the swimming pool in the district and were satisfactory.

## PUBLIC HEALTH ACT 1936.

Section 75. (Provision of dustbins etc.) 34 complaints were received concerning defective or insufficient dustbins, 2 of these complaints were not justified. As the result of informal action dustbins were provided or renewed at 32 different premises.

Section 83. (Filthy or verminous premises) 2 cases of premises in a filthy condition were found and dealt with. No premises in a verminous condition were observed or complained of during the year.

Section 92. (Nuisances.) (Not including matters dealt with under Section 75) Some 98 complaints of alleged insanitary conditions were received, recorded and investigated. 95 of these complaints were justified but only 51 were matters that could be classed as nuisances under this Section, the remaining 44 complaints concerning such matters as rodent infestations, etc.

As a result of these complaints and also by routine inspections, 44 informal or verbal notices were served requiring the abatement of nuisance. 3 Statutory Notices were also served of which 2 were complied with and 1 cancelled as the result of alternative action under the Housing Acts. It was not necessary to institute legal proceedings in any instance.

During the year 37 nuisances were abated, and 37 informal and 2 Statutory Notices complied with.

A summary of defects remedied is appended.

Section 167. (Disinfection of premises, articles etc.) Following cases of disease, the disinfection of rooms and articles therein was carried out in 3 instances.

Section 269. (Control of moveable dwellings) 14 visits were made to moveable and other temporary dwellings which consisted generally of modern trailer type caravans. The dwellings and their sites were maintained in a sanitary and hygienic manner with suitable sanitary accommodation and water supply readily available.

7 sites and 7 moveable dwellings were licensed during the year.



## PREVENTION OF DAMAGE BY PESTS ACT 1949

The work of rodent destruction under this Act was carried out, as previously, by One part time rat-catcher at a low cost to the Council.

Infestations were revealed by complaint, during inspections for other matters or by surveys of areas believed to be infested.

Infestations were recorded at the following number and type of premises:-

Private houses	35:
Council houses	8.
Business premises	2.
Council property	1.
Premises within areas where)	8. private houses and
block treatments carried out)	2. business premises.

A total of 143 points were pre and poison baited at these premises. Rat proofing of the structure was carried out at 5 premises as the result of informal action.

Baiting of the Town sewers was carried out twice, the result and extent being as follows:-

	<u>Manholes examined.</u>	<u>Manholes baited.</u>	<u>Bait taken.</u>
June treatment.	16.	9.	4.
December treatment.	43.	34.	13.

The Council's present refuse tip is situated within the area of an adjoining rural district council who also share the refuse tip. By arrangement the rural district council attend to any rodent infestation that may occur at the tip.

## THE HOUSING ACTS etc.

Housing Survey. As was anticipated in the Annual Report for 1953, the Housing Survey first commenced in 1949 was completed, some 153 further houses being surveyed during the year.

The Housing Repairs and Rents Act 1954, that came into force on the 30th August 1954, placed an obligation on the Council to submit to the Minister of Housing and Local Government proposals for dealing with the demolition, clearance etc., of houses which appear to the Council to be unfit for human habitation.

Due to the time lag between the commencement and the completion of the Housing Survey, most Category V. houses were re-inspected in order that any information given on which to base the proposals concerning these houses was accurate and up to date.

It was found that due to changed circumstances, the carrying out of repairs etc., that those houses originally within Category V. could be sub-divided into three further groups.

The final figures of those houses requiring action by the Council to secure the repair, closure or demolition of same, based on the figures available at the present time, are as follows:-

Category II. (Houses requiring minor repairs).	97.
Category III. (Houses requiring extensive repairs).	279.
Category Va. (Houses of a 'borderline' nature).	21.
Category Vb. (Houses for closure etc., in near future).	19.
Category Vc. (Houses for immediate demolition).	14.
Total:	<u>430.</u>

## Section II. (Demolition of individual unfit houses)

Action under this Section of the Housing Act 1936, was as follows:-

- |                         |    |  |
|-------------------------|----|--|
| Demolition Orders made. | 1. | (House vacant at date of Order).   |
| Closing Orders made.    | 3. | (7 persons displaced and rehoused by the Council).   |
| Undertakings accepted.  | 1. | (House not to be used for living purposes, 3 persons displaced and rehoused by the Council). |

## Part IV. Housing Act 1936

One case only of Statutory Overcrowding was found and recorded during the year. The family concerned found suitable alternative accommodation of their own accord a few weeks after they were found to be living under overcrowded conditions. No action was required by the Council in this instance and there were no other known or recorded cases of Statutory Overcrowding within the district.

### General.

36 Council Houses and 5 Private Dwellings were completed and occupied during the year, there now being an approximate total of 1352 inhabited dwellings within the district.

## HOUSING REPAIRS AND RENTS ACT 1954.

Part II. There were no applications for Certificates of Disrepair by tenants of houses where a landlord had claimed a repairs increase in rent. Such applications for a certificate can be made to the Council by a tenant who considers his house is not in sufficiently good condition to warrant an increase in rent under this Act. Where the Council are also of the same opinion they are required to issue a Certificate of Disrepair to the tenant.

## FACTORIES AND OUTWORKERS.

During the year 29 inspections were made of premises registered as Factories under the Factories Act 1937. 3 inspections were made at sites where building operations were in progress and Section 7 of the Act was enforceable.

There were 3 instances where informal action was taken to secure the cleanliness of sanitary conveniences and this action was complied with in each case. Informal action was also taken in 1 instance to secure the provision of proper sanitary accommodation at a factory, this matter was deferred by agreement until early in 1955 pending renewal of lease by the present occupier.

There were no known or recorded persons carrying on Outwork within the district.

The prescribed particulars on the administration of, and as required by the Factories Act, is appended.

## SHOPS ACT 1950

Only 6 inspections of shops were made specifically under this Act but the requirements were enforced at the same time as inspections of various types of shops were carried out for other purposes.

No contraventions were recorded.



## PETROLEUM ACTS 1928 & 1936.

33 visits were made to premises at which petroleum was stored and informal action taken to secure proper and efficient means of extinguishing fire was complied with in all 3 cases.

Storage of petroleum was discontinued at 1 premises and resumed at 1 other premises. The number of licenses in force was 30 and the approximate total quantity of petroleum stored in the district was 80,750 gallons.

## PET ANIMALS ACT 1951.

2 stalls were licensed as pet shops during the year and 6 inspections were made under this Act. The 2 stalls were used for the sale of pet animals during the late Spring and Summer months only and were present in the Town on one day each week. The requirements of the licenses were complied with satisfactorily in both cases.

## MILK, DAIRIES AND FOOD PREMISES.

There are 45 food premises and an average of 7 food stalls within the district and these have generally been maintained at a reasonable hygienic standard.

102 inspections of such premises were made during the year.

Pending the coming into operation of the anticipated Regulations as provided for in the Food and Drugs Amendment Act 1954, concerning the observance of sanitary conditions and practices etc., action during the year was confined to ascertaining that the existing legislation was complied with regarding hygienic conditions in general. In the case of structural alterations or improvements, action was in most cases confined to recommendations as it is expected that the new Regulations will make great changes to the legal obligations of the various types of food traders.

It had been expected that the Food and Drugs Amendment Act 1954, and any Regulations made thereunder would have come into operation during the latter half of the year. It has now been intimated that they are expected to come into force early in 1955.

## Section 14, Food and Drugs Act 1938.

7 premises where sausages and preserved food etc., is manufactured are registered under this Section, as are 18 premises where icecream is sold or manufactured. These premises were maintained in a satisfactory state during the year.

## Milk and Dairies Regulations etc.

A new Creamery commenced operations in the district during the latter part of the year. At present it is used as a receiving point for milk in churns from various milk producers in the area, the milk being passed through cooling apparatus at the Creamery prior to dispatch in bulk containers of 3,000 gallons each to a pasteurisation plant outside the district.

Licenses issued under the Milk (Special Designation) (Raw Milk) Regulations 1949, were 5 in all and were made up as 3 licenses for Principal Dealers and 2 supplementary licenses for dealers from outside the district.



Licenses issued under the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations 1949, were 6 in all and were made up as 4 licenses for Principal Dealers and 2 supplementary licenses for dealers from outside the district.

8 visits were made to Dairies and Milk Distributors during the year.

#### Sampling.

4 samples of Specially Designated milk were taken and each sample satisfactorily complied with the prescribed methylene blue test.

9 samples of ice cream were taken for bacteriological report. 7 samples were Grade I, the other 2 samples being Grade II, and classed as satisfactory.

#### Voluntary Surrender of Food.

The following amounts of foodstuffs were surrendered to me by traders in the Town and rejected as unfit for human consumption. A Certificate of Surrender was issued in each case and the foodstuffs were removed and properly disposed of.

Fresh meat	...	...	...	85 lbs.
Cheese	...	...	...	14 lbs. 8 ozs.
Preserves	...	...	...	6 lbs.
Tinned fish	...	...	...	18 lbs. 5 ozs.
Tinned fruits	...	...	...	247 lbs. 5 ozs.
Tinned meats	...	...	...	129 lbs. 4 ozs.
Tinned vegetables	...	...	...	29 lbs. 13 ozs.
Tinned milk	...	...	...	79 tins.

#### Meat Inspection etc.

Following the release of the Slaughterhouse by the Ministry of Food and the resumption of private slaughtering in July 1954, there was a sharp decline in the numbers of animals slaughtered for food in Diss. Comparative figures are as follows:-

<u>Year.</u>	<u>Cattle.</u>	<u>Pigs.</u>	<u>Sheep.</u>	<u>Calves.</u>	<u>TOTAL.</u>
1954	999.	2,450.	1,698.	323.	<u>5,470.</u>
1953	1,441.	2,164.	2,425.	1,015.	<u>7,045.</u>
1952	1,549.	1,891.	1,866.	1,165.	<u>6,461.</u>
1951	1,632.	1,401.	1,633.	1,046.	<u>5,712.</u>
1939	645.	2,213.	735.	132.	<u>3,725.</u>

Rejections of meat and offal continued to decrease in amount but this was due to the reduction in numbers of animals slaughtered and also the general improvement in the quality of the animals slaughtered in the district.

Comparative amounts of meat and offal rejected are as follows:-

1954.	7 tons.	18 cwts.	0 qrs.	5 lbs.
1953.	12 tons.	0 cwts.	2 qrs.	23 lbs.
1952.	19 tons.	11 cwts.	0 qrs.	0 lbs.
1951.	17 tons.	7 cwts.	0 qrs.	20 lbs.

I append a summary of the causes of rejection and it will be seen that Tuberculosis is still the main cause of rejection in cattle and pigs. Similarly rejections of offal due to parasitic affections account for the greater amount of offal rejected.

As was anticipated in the Annual Report for 1953, the Slaughterhouse has proved to be more suitable for dealing with the present numbers of animals slaughtered than when large numbers of animals were slaughtered under Ministry of Food control. Although below general modern standards for slaughterhouses, the slaughtering contractor has made good use of the existing buildings which, by nature of their design, structure and situation, cannot be greatly improved.

With the resumption of private slaughtering some difficulty was anticipated concerning the rejection of meat and offal found to be unfit for human consumption, such rejections now being in many cases a direct loss to the butcher owning the animal rejected in entirety or in part. It was very pleasing to find that such difficulty did not arise but instead a certain amount of goodwill and co-operation was created between the butchers within and without the Urban District using the Slaughterhouse, the slaughtering contractor, the slaughtermen, and myself. I would add that without this co-operation the work of meat inspection could, at times, be somewhat difficult.

I have endeavoured to remove the fallacy that the main object of meat inspection is to 'condemn' meat and offal, whereas the object is to save as much meat and offal as possible whilst adequately safeguarding the public from the consumption of diseased or otherwise unsound meat and offal.

The method of disposal of rejected material has continued as when under Ministry of Food control. That is the rejected materials are collected by the Suffolk Fat and Bone Company Ltd., of Oulton Broad, for reduction into fertilisers etc.

The staining of rejected meat with green dye has been continued.

#### REFUSE COLLECTION, DISPOSAL AND SALVAGE.

Collection. At the end of the year the number of premises from which refuse is collected was estimated at 1,285, the number of dustbins to be cleared being approximately 1,380.

During the first half of the year the average period between collections of refuse from premises in the Town area was 9 days. During this period there was a complete change of staff and a fresh driver and ashbinman employed. These two men between them reduced the time between collections to 7 days and during the latter half of the year a regular weekly refuse collection was achieved and maintained.

Disposal. The tipping of refuse at the Roydon Tip progressed satisfactorily during the year. Large quantities of covering material were deposited at the Tip free of charge by the Contractors working on the new sewerage scheme in the Town.

A small amount of track material for the refuse vehicle to run over the deposited refuse was purchased and put into use. This material has proved to be most useful, greatly reducing man hours at the Tip and allowing the time thus saved to be spent on the collection of refuse.

The Rose Lane Tip, completed during the previous year, was levelled by means of a hired bulldozer and handed back to the Owner.



Trade Refuse Collection. A scheme for the collection of trade refuse was put into force as and from the 1st of May 1954.

The basis of this scheme is that all refuse collected from each business or premises in separate occupation shall be contained in standard size bins (up to  $3\frac{1}{4}$  cub.ft.) and in each case each bin over Two put out for collection shall be charged at the rate of 6d per week. Those premises with over Two refuse bins being guaranteed a weekly collection.

An average of 14 excess bins from 10 different business premises were collected each week after the scheme was put into operation. It was found that the number of bins put out for collection was reduced at several premises and this scheme has, in effect, caused some saving of time spent on refuse collection.

About this period no persons were allowed to deposit rubbish at the Refuse Tip without a written authorisation. The main object of this being to prevent indiscriminate tipping by unknown persons and nuisance due to the incorrect placing of refuse in the Tip, which before had caused time to be spent by the refuse collectors to clear and tidy the Tip after such persons had left the area and could not be traced.

Authorisation was not withheld provided the person authorised carried out certain simple requirements printed on the authorisation form. Varying charges were made for tipping facilities at the Tip, from 1/-d for a casual load to 7/6d per quarter year for certain business concerns who wished to use the Tip regularly.

Salvage. There was an increase in the value of paper salvage during the year and a little more was collected. The result being an improved return from same compared with the Two previous years. Comparable figures are as follows:-

<u>Calendar Year.</u>	<u>Waste Paper Sold.</u>	<u>Approx. Value.</u>
1954	32 tons. 18 cwts. 0 qrs.	£145
1953	30 tons. 6 cwts. 0 qrs.	£ 99
1952	26 tons. 12 cwts. 2 qrs.	£ 80
1951	41 tons. 8 cwts. 0 qrs.	£456

Dustbin Hire Scheme. Dustbins were supplied to 26 additional premises during the year and 3 bins previously supplied were renewed. The total number of premises supplied with dustbins under this scheme was 95 at the end of the year which represents a total of 105 dustbins on hire.

The scheme continued to work very smoothly and was much appreciated by those persons taking advantage of it.

#### CONCLUSION.

I consider that the main items of interest during the year were:-

- (a) the completion of the Housing Survey.
- (b) the gradual commencement of action under the Housing Acts to secure the demolition etc., of unfit houses and,
- (c) the attaining and maintaining of a '7 day' refuse collection in the Town.



For the future, a plan of action for the demolition and closure of unfit houses has been arrived at, but there are still some 370 or so houses in need of repair which, if not soon attended to, will in many cases deteriorate to a state where such houses can only, from an economic aspect, be demolished.

I would like to express my thanks and appreciation to the members of the Council, all officers and staff of the Council, for their interest and co-operation during the year. In particular to Councillor L.E.Rush, ex-Chairman of the Public Health Committee, for the time he has spent out of Council and Committee Meetings during which he and I have gone into various public health matters.

E.D.EDWARDS.

Sanitary Inspector.

Diss Urban District Council.



# SUMMARY OF DEFECTS AND NUISANCES REMEDIED

## General.

Accumulations removed	...	...	...	2
Dustbins supplied or renewed by Owners etc	...	...	...	32
Foul ditches cleansed	...	...	...	1

## Drainage.

Additional water-closets provided	...	...	...	1
Drainage systems repaired or re-constructed	...	...	...	7
Obstructed drains cleared	...	...	...	5
Pail closets renewed	...	...	...	1
Sinks provided	...	...	...	1
Water-closets repaired	...	...	...	1

## Repairs to Dwellinghouses.

Ceilings repaired - rooms	...	...	...	5
Chimneys and flues repaired	...	...	...	2
Dampness remedied - rooms	...	...	...	10
Doors and windows repaired	...	...	...	4
Externam walls repaired	...	...	...	1
Rainwater pipes and gutters repaired or renewed	...	...	...	3
Roofs repaired	...	...	...	8
Internal walls repaired	...	...	...	6

## Water Supply.

Internal water supply provided	...	...	...	1
Water supply improved	...	...	...	1

## PRESORIBED PARTICULARS REQUIRED BY SECTION 128 (3), FACTORIES ACT, 1937

### 1. INSPECTIONS for purposes as to health:-

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities..	1	1	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority..	40	28	2	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding Out-worker's premises) ..	3	3	-	-
TOTAL ..	44	32	2	-



# SUMMARY OF THE WORK OF SANITARY INSPECTION.

## INSPECTIONS & VISITS.

### A. General

Conservancy and Drainage	...	...	...	69
Factories	...	...	...	32
Game Licenses	...	...	...	4
Marine Store Dealers	...	...	...	6
Pet Animals	...	...	...	0
Petroleum Acts	...	...	...	33
Piggeries	...	...	...	1
Rodent Control	...	...	...	108
Shops	...	...	...	6
Water Samples	...	...	...	6
Water Supplies	...	...	...	7
With Medical Officer of Health	...	...	...	15
Miscellaneous Sanitary Visits	...	...	...	95

### B. Housing.

Houses inspected under Public Health Act..	...	...	...	90
Houses inspected under Housing Acts	..	...	...	73
Housing Survey	...	...	...	153
Overcrowding	...	...	...	1
Re-visits to houses	...	...	...	132
Tents, Vans and Sheds etc.	...	...	...	14
Verminous or Filthy Dwellings	...	...	...	2
Miscellaneous Housing Visits	...	...	...	78

### C. Infectious Disease.

Enquiries into cases	...	...	...	1
Disinfections carried out	...	...	...	3
Miscellaneous Infectious Disease Visits	...	...	...	3

### D. Food Premises.

Dairies and Milk Distributors	...	...	...	8
Food Premises including Market Stalls	...	...	...	102
Miscellaneous Food Visits	...	...	...	53

### E. Sampling.

Ice cream	...	...	...	9
Milk	...	...	...	4

### F. Meat Inspection.

Visits to Slaughterhouse	...	...	...	343
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### G. Refuse Collection.

Visits in connection with Collection, Disposal and Salvage.	...	...	...	175
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TOTAL VISITS AND INSPECTIONS	...	...	...	<u>1,632</u>
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SUMMARY OF MEAT AND OFFAL REJECTED AS UNFIT FOR HUMAN CONSUMPTION

DISEASE OR CONDITION	MEAT (Pounds)					OFFAL (Pounds)				
	CATTLE	PIGS	SHEEP	CALVES	TOTAL	CATTLE	PIGS	SHEEP	CALVES	TOTAL
TUBERCULOSIS	3,731	1,606	-	-	5,337	2,243	89	-	-	2,332
INJURY, BURNS, PNEUMONIA, BAD BLEEDING AND OTHER CONDITIONS.	645	1,993	66	185	2,889	814	1,176	58	61	2,109
OEDEMA	721	4	34	69	828	124	12	15	12	163
PARASITIC AFFECTIONS	-	-	-	-	-	2,829	560	221	3	3,613
ACTINOMYCOSIS & ACTINOBACILLOSIS	16	-	-	-	16	325	-	-	-	325
SWINE ERYSIPELAS	-	-	-	-	-	-	29	-	-	29
UMBILICAL PYAEMIA	-	-	-	51	51	-	-	-	9	9
GRAND TOTALS	5,113	3,603	100	305	9,121	6,335	1,866	294	85	8,580

